Salem Health Hospitals & Clinics
Emergency Operations Plan (EOP)
AFTER ACTION REPORT

PURPOSE AND REPORTING CRITERIA: A post incident review and after action report is required for an emergency EOP activation or a planned EOP exercise, but optional for planned non-emergency events, such as maintenance projects.

☒ EMERGENCY EOP ACTIVATION   ☐ EOP EXERCISE   ☐ NON-EMERGENCY EVENT

Day/Date/Time problem first identified: Tuesday, 06/27/17 at 0835

House Supervisor/WVH ED Charge Notification Time: 0839

EOP Activation Time: Wednesday, 06/28/17 at 1027   **Cancellation Time**: Friday, 07/07/17 at 1036

Affected area (i.e. Salem campus, building, unit, clinic, etc.)**:** United States

EOP Activated (e.g. Code Triage/Power Disruption): Physician's Code Triage/Dictation System Disruption

Name of key staff involved: Lynnda Zubrinich, house supervisor; Denise Hoover, administrator-on-call; Ryan Parent, IS manager-on-call.

POST INCIDENT REVIEW

Date: 07/18/17

Review participants: Dr. Jefferson Loa, Lynnda Zubrinich, Denise Hoover, Zennia Ceniza, Michael Gay, Laura Morin, Debra Harris, and Wayne McFarlin

After Action Report completed by: Wayne McFarlin

POST INCIDENT REVIEW OBSERVATIONS

DESCRIBE WHAT HAPPENED: A worldwide cyber-attack beginning in Europe resulted in the vendor for the hospital's physician's dictation system suspending all United States use of their system to limit the spread of the attack. Mitigation plans were implemented tailored by I.S. staff to the involved physician groups. There were about 150 physicians directly impacted by this disruption. Some physician groups, such as the Emergency Department physicians, weren't impacted directly at all because of their use of scribes.

DESCRIBE IMPACT ON OPERATIONS (Mark N/A if no impact)

- **Patient care:** No adverse patient impact was reported. The greatest challenge for users was trying to follow up after another physician had previously seen the patient. One physician attempted to quantify the impact on their work indicating this disruption reduced their ability to see 3 patients a day.
- **Communications:** Physician leaders were notified with the Physician Leadership Notification template in the Everbridge emergency notification system. Emergency Common Ground communications were also used.
- **Staff roles/responsibilities:** Incident Command Team
  - o Incident Commander—Denise Hoover
    - ▪ Public Information Officer—Michael Gay
    - ▪ Liaison Officer—Walt Myers
    - ▪ Safety Officer—Bruce McLean
  - o Operations Section Chief—Zennia Ceniza
  - o Planning Section Chief—Margo Halm
  - o Logistics Section Chief—Debra Harris
    - ▪ IS Branch Director: Shea Corum
- **Safety/security:** N/A
- **Resource mobilization:** IS staff worked with physicians to provide alternative documentation options .offered by the vendor, such as the use of Dragon software.
- **Utility systems:** Physician's dictation system.

IDENTIFY WHAT WORKED WELL:

- The incident command team was activated on and off as needed through this incident.
- The emergency notification system "Physician Leadership Notification" template was effective at quickly notifying those 12 physician leaders programmed on the notification.

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- IS staff was effective at providing practical mitigation options for different physician needs.
- Two executives shared administrator-on-call during both weeks of this disruption (Deni Hoover and Shea Corum) ensured a well-informed executive directing mitigation and management of the incident, which optimized communication among organizational leaders as the situation progressed.

DESCRIBE DEFICIENCIES/OPPORTUNITIES FOR IMPROVEMENT:
- A greater number of options is needed to quickly notify physicians (i.e. by section, by who's on-duty, etc.), including an all-physician notification capability.

LIST ANY FOLLOW UP COMPLETED OR ASSIGNMENTS MADE: Increase the emergency notification system options to reach physician recipient groups to allow flexibility in notifying physicians of emergencies.—Kelly Aebi and Wayne McFarlin assigned

OTHER:
- Community involvement? ☐ Yes ☒ No / Organizations involved:
- Physician Involvement? ☒ Yes ☐ No

DISTRIBUTION: **Email** **After Action Reports** **to all affected department managers, directors, executives, the house supervisor and administrator-on-call when the event occurred and the emergency preparedness administrator.**